APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular Subject Matter:: Utility

CD-ROM or CD-R?:: None

Number of CD Disks:: 0

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF:: 0

Title:: STRUCTURE WITH PLANAR STRAINED LAYERS

Attorney Docket Number:: ASC-012DV

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure:: 1
Total Drawing Sheets:: 3
Small Entity?:: No

Licensed US Govt. Agency::
Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Minjoo

Middle Name:: L. Family Name:: Lee

Name Suffix::

City of Residence:: Cambridge

State or Province of Residence:: MA

Country of Residence:: U.S.A.

Street of Mailing Address:: 45 Inman Street

City of Mailing Address:: Cambridge

State or Province of Mailing Address:: MA

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 02139

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Christopher

Middle Name:: W.

Family Name:: Leitz

Name Suffix::

City of Residence:: Manchester

State or Province of Residence:: NH

Country of Residence:: U.S.A.

Street of Mailing Address:: 262 Main Street, Apt. 2

City of Mailing Address:: Manchester

State or Province of Mailing Address:: NH

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 03102

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Eugene

Middle Name:: A.

Family Name:: Fitzgerald

Name Suffix::

City of Residence:: Windham

State or Province of Residence:: NH

Country of Residence:: U.S.A.

Street of Mailing Address:: 7 Camelot Road

City of Mailing Address:: Windham

State or Province of Mailing Address::

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 03087

Correspondence Information

Correspondence Customer Number:: 021323

Representative Information

Representative Customer Number:: 021323

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This application	Division of	10/211,126	08/02/2002
10/211,126	Non-Provisional of	60/310,346	08/06/2001

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

Assignee Information

Assignee Name::

Massachusetts Institute of Technology

City of Mailing Address:: Cambridge

State or Province of Mailing Address:: MA

Country of Mailing Address:: U.S.A.